

1022-00

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | NW | 7534 | 09-12-00 |
| O.I.P.E. CLASSIFIER | | 13 | 9/15/00 |
| FORMALITY REVIEW | HA | 853 | 10-12-00 |
| RESPONSE FORMALITY REVIEW | MD | XC9A | 04/16/01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------------|------|
| Final Original | |
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| 2 | 8/02 |
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| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet her

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